

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: THOMPSON ET AL. Examiner: A. STEWART  
Serial No.: 09/954,555 Group Art Unit: 3738  
Filed: SEPTEMBER 17, 2001 Docket: 11576.55USI1  
Confirmation No.: 9046 Due Date: FEBRUARY 28, 2004  
(SATURDAY)

Title: IMPLANT DELIVERY SYSTEM WITH INTERLOCK

CERTIFICATE UNDER 37 CFR 1.8:

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, with sufficient postage, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on March 1, 2004.

By:   
Name: Carla J. Mauch

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**23552**

PATENT TRADEMARK OFFICE

Sir:

We are transmitting herewith the attached:

- ☒ Transmittal Sheet in duplicate containing Certificate of Mailing
- ☒ Amendment and Response
- The fee has been calculated as shown below in the "Claims as Amended" table
- ☒ Supplemental Information Disclosure Statement, Form 1449, 1 Reference(s)
- ☒ Terminal Disclaimer, Certificate Under 37 C.F.R. § 3.73(b)
- ☒ Check in the amount of \$470 for Additional Claims Fee
- ☒ Check in the amount of \$180 for Submission of Supplemental Information Disclosure Statement
- ☒ Check in the amount of \$110 for Terminal Disclaimer
- ☒ Return postcard

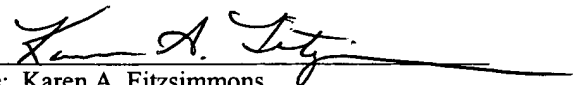
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TECHNOLOGY CENTER R3700

CLAIMS AS AMENDED

| Claims Remaining After Amendment |   | Highest Number Previously Paid For |   | Present Extra |   | Rate  |   | Fee      |
|----------------------------------|---|------------------------------------|---|---------------|---|-------|---|----------|
| Total Claims                     |   |                                    |   |               |   |       |   |          |
| 53                               | - | 46                                 | = | 7             | x | 18.00 | = | \$126.00 |
| Independent Claims               |   |                                    |   |               |   |       |   |          |
| 11                               | - | 7                                  | = | 4             | x | 86.00 | = | \$344.00 |
| MULTIPLE DEPENDENT CLAIM FEE     |   |                                    |   |               |   |       |   | \$0.00   |
| TOTAL FILING FEE                 |   |                                    |   |               |   |       |   | 470.00   |

Please consider this a PETITION FOR EXTENSION OF TIME for a sufficient number of months to enter these papers or any future reply, if appropriate. Please charge any additional fees or credit overpayment to Deposit Account No. 13-2725. A duplicate of this sheet is enclosed.

MERCHANT & GOULD P.C.  
P.O. Box 2903, Minneapolis, MN 55402-0903  
612.332.5300

By:   
Name: Karen A. Fitzsimmons  
Reg. No.: 50,470  
KFitzsimmons/cjm